



PTO/SB/17 (07-06)

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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/665,516
TOTAL AMOUNT OF PAYMENT		Filing Date	September 22, 2003
(\$)		First Named Inventor	Andre STAMM
1,020		Examiner Name	Humera N. Sheikh
		Art Unit	1615
		Attorney Docket No.	31672-224618

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 22-0261
	Deposit Account Name: VENABLE LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		Fee (\$)	Fee Paid (\$)
		x	=				
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
	- 100 =	/50	(round up to a whole number) x	=			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 3 mo. Extension of Time						\$1,020	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	38,898
Name (Print/Type)	Edward D. Grieff	Telephone	(202) 344-4000
		Date	January 26, 2007

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of : **Stamm et al**

Application No. **10/665,516**

Group Art Unit: **1615**

Filed: **September 22, 2003**

Examiner: **H. Sheikh**

For: **Suspensions of Micronized Fenofibrate**

Docket No: 224618

Commissioner of Patents
PO Box 1450
Alexandria, VA 22313-1450

Response Under 37 CFR § 1.111

This Response is submitted in reply to the Office Action dated July 27, 2006, for which a response is due on or before January 27, 2007.

Applicants respectfully request that the due date for response be extended by three months from October 27, 2006, to January 29, 2006 (i.e., the first business day following Saturday, January 27, 2006). To this end, the Commissioner is authorized to charge the three month extension of time fee of \$1020 to Deposit Account No. 22-0261. The Commissioner is authorized to charge any other necessary fees or credit any overpayments to Deposit Account No. 22-0261.

Remarks begin on page 2.

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